Exhibit I

March 16, 2023 Correspondence with Attachments

From: Case 16.03.2023 13:51:45

To: NOC Claims
Subject: death certificates
Attachment: death certificates for equitable.pdf

EXTERNAL EMAIL (Outside EQH Network): Use caution with links and attachments.

Hello. I am the tertiary beneficiary for the enclosed deceased Ioannis Triantafillos policy number 6693. Nikolaos and Dino Rentoulis, my parents are deceased as well who were beneficiaries. Their death certificates are in closed as well. You can reach me at this email or

Sent from my iPhone

Security Feature: 051443555-Pa6W7bPvnAUvAF2GguS_kg

HELLENIC REPUBLIC

PREFECTURE

Arkadia

MUNICIPALITY REGISTRY

South Kynouria

ADDRESS

M.E. of Tyros Z.C. 22029

Telephone

2757360223

Death Registration

PARTICULARS OF REGISTRATION

Security Feature:

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Info of Death Certificate (No./vol./year)

40/1/2022

Date Registered:

11/30/2022 09:33

PARTICULARS OF DECEASED

Last Name:

Triantafyllou

First Name:

loannis

Father's Name:

Triantafyllou, Panagiotis Triantafyllou, Stavriani

Mother's Name:

Citizenship: Religion:

Greek Orthodox Christian

Birth Place:

Tyros, Tyros, South Kynouria, Arkadia,

(Mun/Local Com, Mun. EntityGreece

Municip., Prefecture, Country)

Birth Settlement:

Tyros

Birth Date:

1955

Arkadia, Greece

Place of Residence:

22029, Tyros, Tyros, South Kynouria,

(Z.C., Local Com, Mun. Entity

Municip., Prefecture, Country)

Age:

67 years old

Municip. of Registration:

South Kynouria, Arkadia

Municipal Roll Number:

9762/1

Family Status:

Single

Occupation:

UNEMPLOYED

Type of ID

POLICE ID CARD

Number of ID:

7895

ID was issued:

06/06/1970

TAX ID NO .:

Insurance Carrier:

0680

SOC. SEC. NO.:

3612 **EFKA**

1) 2)

3)

PARTICULARS OF BURIAL/CREMATION

Place:

Tyros, Tyros-South Kynouria, Arkadia

Prefecture (MUNICIPAL CEMETERY

"SAINT ANASTASIA")

Date:

11/30/2022

IOUNOU LOONOYYIOU LEA LOTEPIKOY Time:

15:00

PARTICULARS OF DEATH

Place:

Other Institution of communal living

Tripolis, Tripolis, Tripolis, Arkadia,

(PALADION KAA)

Place:

(Street, No., ZC,

2nd km Regional National Road TRIPOLI-TEGEA

Mun/Loc Comm, Mun.

Greece

Entity, Municipality, Prefecture, Country)

Date:

Time:

06:45

11/29/2022

Cause:

Cardiopulmonary failure, Aspiration,

Serious respiratory infection, Parkinson's disease

appearing as spastic tetraplegia.

NOTES

CORRECTIONS

Round seal: HELLENIC REPUBLIC MUNICIPALITY SOUTH KYNOURIA REGISTRY – M.E. TYROS

> REGISTRAR <Alexandra Chr. Kamvyssi>

The foregoing is a true and exact translation from Greek into English of the attached Ζαχορη-Ραλλού Κυρισκοπούλου document.
Δικηγόρος Δικ. Συλλόγου Μεσολογγίου

Astoria, New York, NY

March 10th, 2023

2217 Steinway Street, 11105 Astoria, NY, USA ΑΦΜ 077331189-ΔΟΥ ΚΑΤ.ΕΞΟΙΕΡΙΚΟΥ

Zachari-Rallou Kyriakopoulou, Esq. Attorney admitted in NY State Bar, and Messologi, Greece, Bar Association

NY STATE BAR REG. NUMBER: 5710843 Messologi Bar Association Reg. No: 122 Address: 2217 STEIWAY STREET,

ASTORIA, 11105 NY, USA

E-mail: Rallou@tandplawfirm.com

Tel. +1-718-721-1250, Cell: +1-917-415-0296

Case 7:23-cv-07905-PMH Document 1-9 Filed 09/06/23 Page 5 of 6

harre with the 1940 D2#-1981 (\$701) DEPARTMENT OF HEALTH 5946 131-2021-00051461 RICKINI V. MINI CERTIFICATE OF DEATH STATE FILE NUMBER 148 LAST IA DATE OF DEATH SAME TOUT 2 SEX man a MAD. Ūι (M2 2021 05:24 PM 06 05 Dina S. Reploulis HICHTAL HOLTALENT 48 IN FACILITY, DATE ADMITTED OTHER (Spend) Explain Control GPPNUM JUCH PROMENT INCUMENT НО3/5. (. ГАСШТУ YEAR **QUALITY** 04 01 2021 п 40 (OCCITY (CAS) SALAS SALAS SALAS SALAS SOME MOUN HE COUNTY OF DEATH AT MAKE BY PACKETY IT HE BOOMY, DAWN MONTHS Mount Kisco Town Wastchaster Northern Westchester Hospital Association 46 was life; up to transferred thom anciner distillition (1) be specif instruction out to both out out your sould de Melançai recordi no 70. IF AGE UNDER 1 YEAH, HAME OF HOSPITAL OF BIRTH: TA CHIN AND STATE OF BIRTH JIF BOLUSA, COURTY and
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1 Corone: 2 Medical Examiner / Deputy Medical Examiner Address 400 E Main St, Mount Kisco Town, NY 10549 258. Il coroner is not a physician, enter Coroner's Physician's nome & liste 250. It contiles is not attend no physician, enter Attending Physician's name & late. kerse ka 26A Attending physician attended decreased. Help 04 01 152 268. Deceased last seen along Yer. V:n21 . . . Day by atlanting physician. 06 05 2021 ov 06 05 2021 a 05:24 PM 2021 h 06 05 2021 26 WAS CASE REFERRED TO UNDETERMINED GIRCUMSTANCES PENDING INVESTIGATION 298. AUTOPSY7 298. IF YES, WERE FINDINGS USED TO DETERMINE NO YES REPUSED | CAUSE OF DEATH? CURUNER OR MEDICAL EXAMINER? ACCIDENT - HOMICIDE SUICIÓE □6 0 **X** NO 1 TES **□**5. 0 INC <u>□3`</u> _ **□** • t 🔲 YES ∵ []2_. CONFIDENTIAL SEE INSTRUCTION SHEET FOR COMPLETING CAUSE OF DEATH 30 DEATH WAS CAUSED BY FEWIER UNITY ONE CAUSE FER LINE FOR (A), (B), AND (C)) PART I. IMMEDIATE CAUSE. (A) Respirationy Failure with Hypoxemia : DUE TO OR AS A CONSTQUENCE OF: IB) Adult Respiratory Distress Syndrome months months DUE TO OR AS A CONSEQUENCE OF: it) COVID-19 Pneumonia entromi PART IF OTHER SIGNIFICANT CONDITIONS CONTROLLING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN PART I (A). DID TOBACCO USE CONTRIBUTE TO DEATH? 0 ☑ NO 1 ☐ YES 2 ☐ PROBABLY 3 ☐ UNYENOWN 31B INJURAY LOCALITY: (City or fown and county and state) 31C DESCRIBE HOW INJURY OCCURATOR 31D, PLACE OF INJURY: HOUR. 31E, INJURY AT WORK? 31A IF INJURY, DATE POUTH DAY YEAR NO YES 33. NES DECEOENT

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